PTO/SB/22 (09-06)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006		Docket Number (Optional) T2171.0214	
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		121/1	.0214
Application Number 10/773,244-Conf. #7164		Filed February 9, 2004	
For ANISOTROPIC WET ETCHING OF SILICON			
Art Unit 1765		Examiner	E. B. Chen
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filling a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
One month (37 CFR 1.17(a)(1))	<u>Fee</u> \$120	Small Entity Fee \$60	\$
X Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ 450.00
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$ \$
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
Applicant claims amall antity status. See 27 CFD 4 27			
Applicant claims small entity status. See 37 CFR 1.27.			
A check in the amount of the fee is enclosed.			
Payment by credit card. Form PTO-2038 is attached.			
The Director has already been authorized to charge fees in this application to a Deposit Account.			
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-2215			
I am the applicant/inventor			
application vertical.			
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
attorney or agent of record. Registration Number			
X attorney or agent under 37 CFR	1.34.		
Registration number if acting under	er 37 CFR 1.34	40,414	_ ·
Signature (40.414)	· · · · · · · · · · · · · · · · · · ·	
		Date (244) 277 C224	
Hua Gao Typed or printed name		(212) 277-6631 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
Total of forms are submitted.			

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